EXTERNAL COMPANY REQUIRING REGISTRATION RE-REGISTRATION



FILL ALL FORMS IN BLOCK LETTERS, AND LEAVE SPACES IN BETWEEN WORDS

PLEASE WRITE ALL WORDS WITH NO ABBREVIATIONS

ALL FIELDS MARKED WITH AN ASTERISK (*) INDICATES A MANDATORY FIELD

A fee is payable on presentation of this form. Please see the fees on our website www.orc.gov.gh

Read the instructions before completing the Form. Incomplete applications or invalid data may delay the registration process

(A)																										
Old Registration	No:*																			State accurately Old						
Old TIN:*	d TIN:*																			Registration Number, Tax						
Current Tax Offic	Current Tax Office:*																			Identification Number, Current Tax office, Old Date of						
Old Date of Regis														Registration												
Company Name*																				Name should be the same as						
																				found on Statutory Documen						
																				of the body corporate incorporated outside Ghana.						
																				incorporated outside difaifa.						
Presented By*																				Presented by a Local Manager or						
Tresented by																			Process Agent							
							т	IN												_						
(B)							1	IIN		Sec	ctor((c)*														
Legal		Estate/I	Hous	inσ		Me	dia			Je		7 -	nsno	ort/ <i>F</i>	\eros	snace			Г	Choose your sector by ticking the						
Utilities		Education		g		-	ppin	σ &, Ι	Onrt			-		'Hou				box next to it.								
Tourism		Mining/					spita		υιι					innir				Specify sector(s). If your sector is not listed, write								
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Insurance Agriculture		Food Inc				_				rc		oui	ers(pieus	se sp	ecijy	,			your sector in the space provide						
Oil and Gas				-		Securities/Brokers										for "others".										
		Manufac		ng		Commerce/ Trading												_								
Construction		Health C		3																						
Telecom/ICT		Security	Indi	ıstry	<u> </u>	Ref						_			ala											
(C)														ities						**************************************						
Select the Intern			ard I	ndus	stria	l Cla	ssific	catio	n (IS	SIC)	code	num	ıber	(s) fo	or th	e pri	ncip	al		ISIC or classification code is a standard classification for						
activity and othe							1	1	1		1	1		1				1		economic or business activities						
		C code 1																		so that establishments could be classified based on the activity						
		C code 2																		they carry out.						
		C code 3																		A detailed list of ICIC on						
	ISI	C code 4																		A detailed list of ISIC or classification codes can be found						
If you cannot det	ermi	ne a code	, plec	ise g	ive c	a brie	ef des	scrip	tion	of the	e con	npan	ıy's k	busin	ess a	ctivi	ty be	elow*	*	on our website at						
																				www.orc.gov.gh						
																				The ISIC code or nature of						
																				business(Objects) provided						
Business Object	t(s)																			should not be different from that of the body corporate						
																				incorporated outside Ghana.						
(D)				J	Regi	ister	ed O	Office	e Ad	dres	s In	Cou	ntry	of I	ncoi	por	atio	n								
House/Building/	Flat															Ī				This address should be the same						
	me or House No.)/LMB*																			address as found on the statutory documents of the body						
Street Name*									<u> </u>											corporate.						
City*																				-						
PMB/DTD																				-						
P.O.BOX									\vdash											-						
1.0.001																										

State/Province*																	
Country of Incorporation*																	
Zip Code*																	-
•					Desir		al Di		of D		:	m Cl					
(E)		I	T	T	PIII	пстр	al Pl	ace (OI BI	usin	ess i	II GI	lana				This is the address at which the
Digital Address*																	external company will operate
House/Building/Flat																	from Ghana.
(Name or House No.)/LMB*																	The digital address can be
Street Name*																	obtained by downloading Ghana
City*																	Post GPS app onto any smart
District*																	phone. To get accurate address, stand at the entrance of the said
Region*																	location or office
PMB/DTD*																	
P.O.BOX*																	
(F)			•	•			P	osta	ıl Ad	ldre	SS						
(c/o)																	Please tick either post office box
																	(P O BOX), private mail bag (PMB) or door to door (DTD) and
Postal Type*		ΡO	ВОХ			PMI	В			D'	TD						provide details as applicable.
Postal Number*																	
Postal Town*																	
Postal Region*																	
(G)							Co	ntac	ts in	Gh:	ana						
Phone No 1*		Τ	T	T		Τ		III			liia						
Phone No 2																	-
Mobile No 1*																	
																	_
Mobile No 2																	
Fax																	
Email Address*																	_
Website																	
(H)							ticul	1		cal	1		•				
Title*	N	Mr			Mrs	5		M	iss		N	/Is			Dr		The duly appointed Local Manager should be resident in
Gender*	M	ale]	Fema	le						ı					the country and can either be
First Name*																	Ghanaian or non-Ghanaian. A person shall be appointed as
Middle Name*																	Local Manager if that person is
Last Name*																	eligible to be appointed as a
Date of Birth*	D	D	M	M	Y	Y	Y	Y									director in a company incorporated in Ghana.
Any Former Name*																	Section 332 (2)
Nationality*																	Section 172 and 173 of Act 992.
Occupation*																	
TIN																	
Without TIN	Fill	the (GRA	TIN I	Form	atta	ched				-						This address when provided will not appear on public record,
Residential Address																	unlike that of the addresses that
Digital Address*																	will be provided for the
House/Building/Flat																	_Company.
(Name or House No.)/LMB*																	Obtain a digital address by
Street Name*																	downloading the Ghana Post GPS app onto any smart phone
City*																	-
District*																	1
Region*																	
			-	+													-
Country*	1	1		1	1	1	1			1				1	1	1	
Mobile No 1*			-														

Mobile No 2																		
Email Address*																		-
Signature*			ı														ı	Must be signed by the Local Manager in Ghana
(I)								r of A										
A document mandating the L						ent t	the c	omp	any i	in Gh	ıana	and	mus	t be	nota	rise	d by	Attach Power of Attorney
a Notary Public in the country	y or ir	icor	pora	uon.														
Power of Attorney*			•				1		1.			•		CD				
(1)	Pa	Particulars of Person Authorised to Accept Service of Process and Other Documents on Behalf of Company																
Title*		N	1r		M	irs		Mi	iss		N	1s			D	r		The process agent is one authorized by a body corporate
Gender*	Ma	ale		F	ema	le												to accept service of processes
First Name*																		and other documents on behalf of the external company. This can
Middle Name*																		either be a natural or artificial
Last Name*																		person
Date of Birth*	D	D	M	M	Y	Y	Y	Y										
Any Former Name*																		
Nationality*																		
Occupation*																		
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Without TIN	Fill	GRA	TIN	Forn	ı atta	ache	d											
Residential Address																		
Digital Address*																		
House/Building/Flat (Name or House No.)/LMB*																		
Street Name*																		
City*																		
District*																		
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Country*																		
Mobile No 1*																		
Mobile No 2																		
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Signature*													1					-
(K)	In (Case	of a					Aut men						rvice any	e of l	Proc	ess	
Corporate Name*																		
Corporate TIN*													1				I	
Digital Address*																		
Corporate Address																		
H/No. LMB*																		
P.O. Box/DTD/PMB*																		
Name of Person Representing the Corporate Secretary*																		
TIN of Representative*																		-
of Itopi obolitorivo																		

Signature(Corporate Representative)*											 			_
Corporate Stamp*														
			A	ttes	ted	by					 			For authentication purposes, two
Director*	TIN													officers of the Company are to sign their signatures together
Name*														with a seal or stamp of the Company
Signature*														_
Secretary*	TIN	Ι			T			Τ	Τ	T		•••••	 •	
Name*														
Signature*													 •	_
						native					 			In the absence of a stamp or a
Director*	TIN													seal of the Company, the signature of two directors and a
Name*														Company Secretary are needed
														for authentication purposes
Signature*											 			
Director*	TIN													
Name*														
Signature*														
Secretary*	TIN													
Name*														
Signature*											 			
(L)						Cap	ital A	mou	ınt					
Nominal Capital														Capital details must be the same as on the Notary Document
Authorised Capital*														as on the Notary Document
Issued Capital*														
Capital Paid up in Cash*														
Capital Paid up otherwise than in Cash	1													
III Gusii								-						_
(M)						 Benefic	rial O	wno	r(B())				
A beneficial owner (or owners) is influence over the legal person (obeneficial owner is an individual	or arrange	emen	t) or	recei	al pe	rson wh	o own	S, CO1	ntrol	s, has				Section 35 (14) and (15) of Act 992
SANCTIONS: Failure to discle	ose is an	offen	ce ar	nd wi	ill at	tract san	ctions	and	pena	alties				
Fill the BO Form attached /D	ownload	(wel	site	www	w.or	c.gov.gl	1)	_						

	For Office Use Only																	
Date of Submission of Document*																		
Name of Company Inspector*																		
Filing Date*																		
Signature*						•••												

Important Information

Notes

Applicants are to submit to the Registrar a copy of the Certificate of Incorporation, a Power of Attorney appointing the Local Manager and where applicable, a copy of the Constitution, Charter, Statutes, Regulations, Memorandum and Articles of Association, or any other instrument constituting or defining the Constitution of the company, in a language acceptable to the Registrar.

The above documents should be notarised by a Notary Public from the country of origin or duly stamped and sealed by the relevant Embassy or Consulate of Ghana from the said country of origin.

Applicants should also submit to the Registrar a Statement duly notarised in the jurisdiction of origin of the Company giving particulars regarding the Beneficial Owners of the company. See section 330(1) (c) of Act 992.

Privacy Notice

Collection of Information: We collect personal identifiable information, like names, postal addresses, email addresses, etc., when voluntarily submitted by our customers. The information provided is used to fulfil your specific request.

Distribution of Information: This would be done as permitted or required by law / Companies Act 2019 (Act 992)

Commitment to Data Security: Your personal identifiable information is kept secure. Only authorized employees, agents and contractors who have agreed to keep information secure and confidential have access to this information.

Change Notice

Every company is required to furnish the Registrar with any change after incorporation e.g. Change of Company Name, Change of Address, Change of Director(s) / Secretary etc.

Financial Statement / Group Accounts

All External Companies are to file Group Acounts once every year at intervals of not more than fifteen months, a Statement of Financial Position amongst other documents to the Registrar. Section 334 of Act 992.

Late/Non Filing attracts Penalties

Check List (✓) Please make sure you have complied with the following The document has been signed at all indicated places Power of Attorney attached Filled TIN Form(s), if any Filled BO Form attached, if any Attach Registration Document of incorporated Company i.e. Charter, Memorandum, Articles of Association, etc.